PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1		FLORIDA I	DEPARTMENT OF STATE		, * • ·
CORPORATION Katherine Harris				FILED	
		_	ecretary of State		
	SOO WE IN		SION OF CORPORATIONS	01 AUG 13	3 PM 4: 05
DOCUMENT # P970000 @1753				SECRETARY OF STATE TALLAHASSEE, FLORIDA	
J&	P Enterprises of Nort	hwest Flo	rida, Inc.		
2. Princip	al Office Address	3. Mailing Off	ice Address	8000045	6 604487 0101082017
			ne Mile Rd, 32514		1.08 ****300.00
		Suite, Apr. #, e	· .	4. Date Incorporated or Qualified	* *
Suite 2319 City & State City & State				To Do Business in Florida	3/10/97
Pensac	ola, Florida	Pensácola	a, Florida	5. FEI Number	Applied For
Zip	Country	Zip	Country	593435617 6.	Not Applicable
32514	USA	32514	USA	CERTIFICATE OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status
		7. Na	me and Address of Current Register	ed Agent	
	Name Richard A. Pope Street Address (P.O. Box Number is N				
-	< 40 W. Nim M. Suite, Apt. #, Etc.	I'LL NOWN	10 to	- <u>-</u>	
	Swite 2319				
	 Pensacola	··············		State Zip Code FL 32514	
8. L being	appointed the registered agent of the abo	ve named cornora	tion, am familiar with and accept the ob		
ure c	11.5	Λ)	mgallons of section obj. (000) (i 077.b)	700, F.S.
Registered Agent REGISTERED AGENT MUST SIGN				Date <u>August 1, 2001</u>	
9. Names	s and Street Addresses of Each Officer and	· · · · · · · · · · · · · · · · · · ·		ant 3 directors)	
Titles	Name of	I Director (i lolik	Street Address of Each		ity / State / Zip
	Officers and/or Directors		Officer and/or Director		ity / State / Zip
PTD	Richard Pope		542 Northcreek Circle	e Pensacola,	Florida 32514
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				1-01 4BC 1	•
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this rei	y that I am an officer or director or the receinstatement application, the reason for diss	olution has been e	liminated, the corporate name satisfies t	the requirements of section 607 0401 o	r 617 0401 E.S. that all food
owed b	by the corporation have been paid and the a application is true and accurate, and my si	names of individua	its listed on this form do not qualify for a	n exemption under section 119.07(3)(i)	, F.S. The information indicated
	1) > 1	ſ.	()		_
SIGNA		<u> </u>	Kan	8-10-01 83	50.494.2780
	SIGNATURE AND TYPED OR PRI	NTED NAME OF SIG	NING OFFICER OR DIRECTOR	Date	Daytime Phone # C2

PAJEZIZ

J & P ENTERPRISES OF NORTHWEST FLORIDA

40 W. Nine Mile Road, Suite 2319 Pensacola, FL 32514 850.494.2780 office 850.969.0207 fax phoenixraven@aol.com

August 10, 2001

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, Florida 32314

Re: Request for Reinstatement

Dear Division of Corporations:

As per our conversation, I am requesting J & P Enterprises of Northwest Florida, Inc. to be reinstated to due the reasons listed below. I have enclosed a check for \$300.00 for my as directed with the explanation for my failure to file.

- 1. I did not receive the Annual Report Form as it was sent to an incorrect address.
- 2. I am in the Air Force Reserves and was on active military duty for several months and wasn't able to ensure the annual report was accomplished.

In closing, I request a one-time exception and reinstate on J & P Enterprises of Northwest Florida, Inc. Thank you in advance for your consideration in this matter.

Yours very Truly,

Richard A. Pope

President

Enc. corporate reinstatement form